	ild nics. Yes □ No 🗹	come, transactions, or liabilities of a spouse or dependent child s" unless you have first consulted with the Committee on Ethics	Exemptions Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethic	
	Yes ☐ No ✔	ee on Ethics and certain other "excepted trusts" need not be st benefiting you, your spouse, or dependent child?	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne disciosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	
	STIONS	TION ANSWER EACH OF THESE QUE	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWER EACH OF THESE QUESTIONS	
		schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.	
	and the appropriate	Each question in this part must be answered and the appropriate	Under the property of the pro	
		If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.	_
	outside Yes 🐼 No 🗌	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any IV. reportable asset in a transaction exceeding \$1,000 during the reporting Period?	
		If yes, complete and attach Schedule VIII.	If yes, complete and attach Schedule III.	
	ing in the Yes No	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearmed" income of III. more than \$200 in the reporting period or hold any reportable asset worth Yes V No more than \$1,000 at the end of the period?	
		If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.	
	e travel or an \$335 Yes 🕢 No 🗌	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$335 from one source)?	Did any individual or organization make a donation to charity in lieu of paying !!. you for a speech, appearance, or article in the reporting period? Yes No	
		If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.	_
	legift in herwise Yes □ No 🗹	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 1. or more from any source in the reporting period? Yes V No	
		UESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	
	late.	ion	Type ✓ Annual (May 15) ☐ Amendment ☐ Termination	_
	more than 30 days	Termination Date:	Report	-
	be assessed against	Employee	vr .	
	A \$200 penalty shall	Officer Or Employing Office:	Filer Member of the U.S. State: AR	
	(HIGHUSE GRIV)FU	(Daytime Telephone)	(Full Name)	_
5	Π.	OFFICE OF THE CLERK 202-225-4301 71 VED 202-225-4301	Steve Womack	
<u> </u>	Ä	FORM A LEAGUE LATE OF THE SOURCE CENTER OF USE BY Members, officers, and egyployees 15 AM 10: 28	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2018 FINANCIAL DISCLOSURE STATEMENT	
	יייייייייייייייייייייייייייייייייייייי		•	4

SCHEDULE I - EARNED INCOME

Name Steve Womack

Page 2 of 8

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Туре	Amount
County of Benton	Spouse Salary	N/A
State of Arkansas	Spouse Salary	N/A

		ï	,										.
JT	Ţ	JT		DC	JT	Exclude: You vacation hom	For an owner publically tradactivities, and	For rental or address.	For all IRAs and self-directed (i.e. exercised, to self exercised, to self exset held in the retirement account of the institution reporting period.	Provide comp symbols.)	ASSI Identify (a) ea a fair market and (b) any o generated mo		SCHEDUL
Sirius Stock	Rental Property 1501/1503 S 12th Street Rogers, AR	Merrill Lynch	Kansas City Life Insurance Universal Life	Kansas City Life Insurance Universal Life	Arvest Bank Accounts	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting	For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e.,plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	Asset and/or income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	BLOCK A	SCHEDULE III - ASSETS AND "UNEARNED" INCOME
\$15,001 - \$50,000	\$100,001 - \$250,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$1,001 - \$15,000	\$15,001 - \$50,000				asset was sold and is included only because it is generated income, the value should be "None."	other than fair market value, please specify the method used. If an	Year-End Value of Asset at close of reporting year. If you use a valuation method	вгоск в	Name Steve Womack
	RENT	INTEREST	INTEREST	INTEREST	INTEREST			period.	check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income	that generate tax-deferred income (such as 401(k) plans or IRAs) you may	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or	вгоск с	omack
NONE	\$5,001 - \$15,000	\$1 - \$200	\$201 - \$1,000	\$201 - \$1,000	\$1 - \$200			9	of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was arrest or represented.	IRAs), you may check the "None" column. For all other assets, indicate the category	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401/k) plans or	BLOCK D	
S(part)										\$1,000 in reporting year.	Transactio Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding	BLOCK E	Page 3 of 8

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Steve Womack	Vomack		Page 4 of 8
DC U.S. Savings Bonds	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

.

SCHEDULE IV - TRANSACTIONS

Name Steve Womack

Page 5 of 8

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented

Į,	SP, DC, JT
Sirius Stock	Asset
S(part)	Type of Transaction
N _o	Capital Gain in Excess of \$200?
12-28-11	Date
\$1,001 - \$15,000	Amount of Transaction

SCHEDULE V - LIABILITIES

Name Steve Womack

Page 6 of 8

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC,	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JĽ	Arvest Bank Rogers, AR	November 2010	Mortgage on Primary Residence	\$100,001 - \$250,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Steve Womack

Page 7 of 8

spouse or dependent child that is totally independent of his or her relationship to you. the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you,

None	Υ	~	Υ	August 20- DC-Israel-DC 26, 2011	August 20- 26, 2011	AIPAC
Days not at sponsor's expense	Was a Family Food? Member Included? (Y/N) (Y/N)	Food? (Y/N)	Lodging? (Y/N)	Point of Departure DestinationPoint of Return	Date(s)	Source

SCHEDULE IX - AGREEMENTS

Name Steve Womack

Page 8 of 8

government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement
January 1999	Arkansas Public Employees Retirement System	Pension Annuity- Mayor of Rogers